

CAU 2739

Atty. Docket No. STE01 P-798B

## CERTIFICATE OF MAILING

I hereby certify that this paper, together with all enclosures identified herein, are being deposited with the United States Postal Service as first class mail, addressed to the Assistant Commissioner for Patents, Washington D.C. 20231, on the date indicated below.

10/28/99  
Date

*Rebecca A. Westers*  
Rebecca A. Westers

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit : 2735  
Examiner : Brian Zimmerman  
Applicant : Joel D. Stanfield et al.  
Appln. No. : 08/998,302  
Filing Date : December 24, 1997  
For : ELECTRONIC SYSTEM, COMPONENTS AND METHOD FOR TRACKING FILES

Assistant Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

Enclosed is an Amendment for the above-identified application.

Any fee for additional claims has been calculated as shown below:

CLAIMS AS AMENDED

	Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total Claims	*63	Minus	**63	=00	x \$ 9	\$00	X \$ 18	\$00
Independent Claims	*14	Minus	***14	=00	x \$39	\$00	X \$ 78	\$00
First Presentation of Multiple Dependent Claims \$130						\$00	X \$260	\$00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$00		\$00

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Applicant : Joel D. Stanfield et al.  
Appln. No. : 08/998,302  
Page : 2

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3
- \*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- \*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.  
The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

\_\_\_\_ Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.

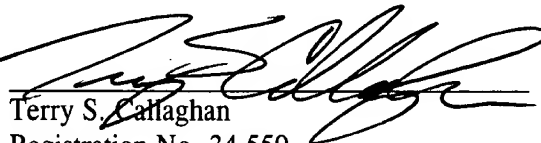
X No additional fee is required.

\_\_\_\_ A fee of \$ \_\_\_\_\_ over the cost of the additional claims added by this response is enclosed.

X Please charge any additional fees or credit overpayment to Deposit Account 16 2463.  
A duplicate copy of this sheet is attached.

PRICE, HENEVELD, COOPER,  
DEWITT & LITTON

10-28-99  
Date

  
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Washington, D.C. 20231

AMENDMENT

In response to the Office Action mailed July 28, 1999, please amend the above-identified application as follows.

In the Claims:

Claim 34, line 11, change "any one" to --each--.

Claim 35, line 12, change "any one" to --each--.

Claim 36, line 12, change "any one" to --each--.

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REMARKS

In the Office Action, the Examiner presented a restriction requirement while indicating that Applicants have constructively elected group VI, claims 34-38, through Applicants' previous election of a group including these claims as presented in a prior restriction requirement that was subsequently withdrawn. Accordingly, the Examiner withdrew claims 1-33 and 39-63 from further consideration. Also in the Office Action, the Examiner rejected